

KJD Media - Model Submission Form

Please fill out and sign entire form and return to KJD Media

Given name: _____

Model name: _____

Date of birth: _____

Las Vegas local? Yes No If Yes, what area: _____

If No, what is your location: _____

Height: _____ Weight: _____ Measurements: _____ - _____ - _____

Augmentation (plastic surgery, tattoos, piercings, etc.): _____

Sites where I can see your work : _____

Why do you want to shoot with KJD Media: _____

Shoot Nude? Yes No If answer isn't universal to photo & video please explain:

Do you have any Foot Worship experience? If so, where? Please provide links if possible:

Foot Worship Okay? Give Receive Both

Bondage Okay? None Light Heavy Not Sure but Openminded

Do you consider yourself: Dominant Submissive Switch Have no Idea

Strip Tease: Photo Video Both

Masturbation Scene Solo: Photo Video Both

Masturbation Scene with another Female: Photo Video Both

Oral Sex with another Female: Photo Video Both

Anything else I should know about you: _____

Model signature: _____ Date: _____
(please use given name)